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## BIB DATA SHEET

CONFIRMATION NO. 2483

| SERIAL NUMBER  | FILING or 371(c)<br>DATE<br>RULE  | CLASS   | GROUP ART UNIT   | ATTORNEY DOCKET<br>NO.      |                           |                                |
|--|---|---|--|-----------------------------|---------------------------|--------------------------------|
| 10/585,361   | 07/06/2006  | 604   | 3761   | MRONCZ ET AL-1<br>PCT       |                           |                                |
| <b>APPLICANTS</b><br>Andreas Mroncz, Sindelfingen, GERMANY;<br>Gabriele Wohnhas, Bergtheinfeld, GERMANY;<br><b>** CONTINUING DATA ***** I.T. 09/17/2009</b><br>This application is a 371 of PCT/DE05/00029 01/12/2005<br><b>** FOREIGN APPLICATIONS ***** I.T. 09/17/2009</b><br>GERMANY 10 2004 001 670.4 01/12/2004<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b><br>04/16/2009 |   |   |  |                             |                           |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and Acknowledged <u>/ILYA Y TREYGER/</u><br>Examiner's signature   |   | <input type="checkbox"/> Met after Allowance<br><u>Initials</u> | <b>STATE OR COUNTRY</b><br>GERMANY                           | <b>SHEETS DRAWINGS</b><br>3 | <b>TOTAL CLAIMS</b><br>13 | <b>INDEPENDENT CLAIMS</b><br>1 |
| <b>ADDRESS</b><br>COLLARD & ROE, P.C.<br>1077 NORTHERN BOULEVARD<br>ROSLYN, NY 11576<br>UNITED STATES  |   |   |  |                             |                           |                                |
| <b>TITLE</b><br>Device for treating bladder-emptying dysfunctions of a human   |   |   |  |                             |                           |                                |
| <b>FILING FEE RECEIVED</b><br>450  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |   | <input type="checkbox"/> All Fees                            |                             |                           |                                |
|  |   |   | <input type="checkbox"/> 1.16 Fees (Filing)                  |                             |                           |                                |
|  |   |   | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |                             |                           |                                |
|  |   |   | <input type="checkbox"/> 1.18 Fees (Issue)                   |                             |                           |                                |
|  |   |   | <input type="checkbox"/> Other _____                         |                             |                           |                                |
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